- 6 CRS-1 Forms are provided for you to complete and submit to the Department.
- You will receive more CRS-1 Forms in the CRS-1 Filer's Kit mailed every June and December.
- Please file your CRS-1 Forms in accordance with your filing status: i.e., monthly, quarterly, semi-annually. If you do not know your filing status, please contact your local district office.
- Sign the return and make check payable to Taxation and Revenue Department.
 Mail to: P.O. Box 25128, Santa Fe, NM 87504-5128

Penalty will be assessed for nonpayment of timely reports. Please indicate your CRS ID number on your check.

Do not make address changes on the CRS-1 Form.

Use the Registration Update, Form ACD-3	1075, included in this packet.
NAME	NEW MEXICO CRS ID NO.
TAXPAYER'S	COPY
Keep this copy as part of	of your records.
Tear at perforation and return to Taxation and Revenue P.O. Box 25128, Santa Fe, New Due date: 25th of month follow	e Department w Mexico 87504-5128
COMBINED REPORT FORM, CRS-1	
NAME	NEW MEXICO CRS ID NO.
STREET / BOX	Please complete if not preprinted
CITY, STATE, ZIP	
Please complete if not preprinted	
Mail To: Taxation and Revenue Department, P.O.	Box 25128, Santa Fe, NM 87504-5128
DEPARTMENT USE LATE FILE DEPARTMENT USE ONLY	DEPARTMENT USE ONLY Do not write in this area

Go Paperless!

File the CRS-1 Form online through the Department's web site:

www.tax.state.nm.us

click on Electronic Services and choose CRS-NET

	Location Code	D Gross Receipts (Excluding Tax)	E Total Deductions	F Taxable Gross Receipts	G Tax	9	H Gross Receipts Tax
TOTAL COLUMNS D, E an	4 🗆			-			
*See instructions for colum	n B.	\$	\$	TOTAL GROSS RECE	IPTS TAX	1	
Payment made by: Automated Clearinghouse Deposit Date Federal Wire Transfer Date		COMPENSATING TAX		2			
				WITHHOLDING TAX		3	
Check if applicable: ☐ A	menaea Ke	port		TOTAL TAX DUE		4	
TAX PERIOD	thr	ough		PENALTY		5	
Month Day	Year	Month Da	y Year	INTEREST		6	
Print	NM CRS	Pho	ne	TOTAL AMOUNT	DUE	7	
Name	_ ID No	No		_		_	Rev. 04/2010
I declare that I have examined the istrue, correct and complete.			9			,	
A Municipality / County B Specia	al C Location	D Gross Receipts	E Total	Taxable Gross	G Tax	_	Gross Receipts
A Municipality / County Rame B Special Code	C Location Code	D Gross Receipts (Excluding Tax)	E Total Deductions	F Taxable Gross Receipts	G Tax	<u> </u>	H Gross Receipts
A Municipality / County B Speci- Name Code	Location Code	Gross Receipts (Excluding Tax)	E Total Deductions	F Taxable Gross Receipts	G Tax	9	
A Municipality / County Rame B Speci. Code	C Location Code	D Gross Receipts (Excluding Tax)	Total Deductions	F Taxable Gross Receipts	G Tax	9	
TOTAL COLUMNS D, E ar	nd H.	Gross Receipts (Excluding Tax)	Total Deductions	F Taxable Gross Receipts TOTAL GROSS RECE	Rate		
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by: Automa	nd H. In B. ted Clearingho l	\$ use Deposit Date	\$	Receipts	Rate		
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by:	nd H. nn B. ted Clearingho Wire Transfer	\$ Date	\$	TOTAL GROSS RECE	Rate	1	
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by: Automa	nd H. nn B. ted Clearingho Wire Transfer	\$ Date	\$	TOTAL GROSS RECE	Rate	1 2	
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by:	nd H. In B. ted Clearinghor Wire Transfer	\$ Date	\$	TOTAL GROSS RECE COMPENSATING TAX	Rate	1 2 3	
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by: Automa Federal Check if applicable: A	nd H. In B. ted Clearinghor Wire Transfer	\$ Date	\$	TOTAL GROSS RECE COMPENSATING TAX WITHHOLDING TAX TOTAL TAX DUE	Rate	1 2 3 4	
TOTAL COLUMNS D, E ar *See instructions for colum Payment made by: Automa Federal Check if applicable: A	and H. In B. Ited Clearinghout Wire Transfer Amended Ro The Transfer Amended R	\$ use Deposit Date Date eport Ough Month Date	\$ y Year	TOTAL GROSS RECE COMPENSATING TAX WITHHOLDING TAX TOTAL TAX DUE PENALTY	EIPTS TAX	1 2 3 4 5	Tax

I declare that I have examined this return including any accompanying schedules and statements, and to the best of my knowledge and belief, it

Rev. 04/2010

is true, correct and complete.